

Factors Affecting Adolescents' Risk-Taking in Single-Child Families

Abstract

Introduction: Given the current concerns about population decline and the prevalence of single-child families, as well as risky behaviors which are increasing in the community, there is a need to provide backgrounds for more information regarding the characteristics of single child and factors affecting the risk-taking of adolescents in these families to modify the risk factors of these in adolescents. **Methods:** This is a descriptive, analytical study. The sample was single-child adolescents and their parents conducted in the census method. The data collection tools were demographics questionnaires, Iranian adolescents risk-taking, and Baumrind parenting style inventory completed by the participants in health centers of Qazvin, Iran, in 2017–2018. The SPSS software version 24 as well as step-wise multiple linear regression model were used to analyze the data. **Results:** One hundred and seventeen adolescents aged 12–19 years participated in this study. About 79% of mothers and 69.3% of fathers had high education. Most of the mothers were homemakers (62.9%) and fathers were employees (76.9%). The regression model demonstrated that emotional and social supports reduce risk-taking. If a decision-maker or supervisor for a teenager is someone other than parents, moreover, when the number of meals served by parents is less than twice a day and lack of leisure-time increase the risky behaviors (adjusted $R^2 = 0.66$, $P = 0.003$). **Conclusion:** Although many factors affect the risk-taking of adolescents in single-child families, parents can reduce their adolescents' risk-taking by increasing their social and emotional supports, planning for spending more time, and allowing them to participate in family decision-making process.

Keywords: Adolescence, risk-taking, single child

Introduction

Risk-taking is referred to behaviors which increase the likelihood of physical, psychological, and social harmful activities. It includes not only risky behaviors but also being at risks by environment, relatives, incorrect and threatening beliefs, and tendencies.^[1] These behaviors are divided into two groups: behaviors that endanger the health and well-being of individuals, such as drug abusing, alcohol, smoking, and having unprotected sexual behaviors. The second group is behaviors threatening the health and well-being of others, such as rubbery, aggression, violence, and running away from the school and home.^[2] According to the Center for Disease Control and Prevention, physical inactivity and unhealthy dietary behaviors are considered as health-threatening behaviors.^[3]

Worldwide studies have shown that most risky behaviors begin before the

age of 18.^[4] According to the World Health Organization declaration in 2015, one-sixth of the world's population and based on the 2016 census in Iran, 13.9% of Iranian population are adolescents between 10 and 19 years. Hence, deficiency in long-term physical and mental health can have a negative effect on public health.^[4]

According to the latest results of the Youth Risk Behavior Surveillance System of Center for Disease Control and Prevention, many high school students are involved in risky behaviors.^[5] In Iran, studies also indicate the prevalence of risky behaviors among adolescents aged 14–18 years.^[4,6] The causes of tendency toward risky behaviors among adolescents are divided into four, namely cognitive, emotional, social-environmental, and family factors.^[2] The role of the family in reducing adolescents' risk-taking is significant.^[7] Various factors in the family reduce the likelihood of risky behaviors in adolescents such as intimate relationship of family members with each other, managing and supervising the children by parents, and

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